U.S. Department of Justice
United States Marshals Service

Filepho et s receipt and process by the U.S. Manual on the reverse of this form.

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF		B.F.C.T	IV Fñ		CASE NUMBE		
United States of America				CR-03-0191 (S-1)(SJ)			
DEFENDANT Nicholas Lupari 2017 MAY 17 AM 11: 07				TYPE OF PROCESS Release of Lis Pendens			
SERVE (NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN United States Marshals Service-EDNY						
▶ {-	ADDRESS (Street or RFD, A)		e and ZIP Code)			=	
AT	225 Cadman Plaza East, B	-			. S. C.	7 M	
SEND NOTICE OF	F SERVICE COPY TO REQUES	TER AT NAME AND A	DDRESS BELOW:	Number of process	A MOS	5 27	1
LORETTA E. LYNCH, United States Attorney				served with this For 282		30 [∓ n
Eastern District of New York				Number of parties to served in this case		至 关	<u> </u>
271 Cadman Plaza East, Seventh Floor Brooklyn, New York 11201						=	
Attn: AUSA Claire S. Kedeshian				Check for service on U.S.A.		8	
	CTIONS OR OTHER INFORMA		SIST IN EXPEDITING	SERVICE (Include I	Business and A	lternate Addresse	s, All
Telephone Numbers Fold	, and Estimated Times Available	For Service):					Fold
Signature of Attorney or other Originator requesting service on behalf of: Output Reduction AUSA Claire Kedeshian DEFENDAN			TELEPHONE NUMBER (718) 254-6051		DATE 05/17/2012		
		laire Kedeshian	DEFENDANT				
	OW FOR USE OF	· · · · · · · · · · · · · · · · · · ·		rized USMS Deputy or		7-	NE
l acknowledge receip number of process in	ndicated. o	District District to Serve	Signature of Author	rized USMS Deputy or	Clerk	Date	7/
(Sign only first US than one USM 285 i	1	lo. <u>15</u> No. <u>13</u>	farre	egu		\angle $\boxed{2}$	<i>F </i>
	return that I have personally ser impany, corporation, etc., at the ac						
☐ I hereby certify	and return that I am unable to	locate the individual, co	mpany, corporation, etc	c., named above (See	remarks below	v)	
	ndividual served (if not shown a					itable age and d	
Address (complete only if different than shown above)				Date	usual place of	abode.	
Address (complete o	niy ii dirlerent than shown above)			Date	of Service 1	lime	am
				5/2	24/12	12:00	<u>(m</u>
				Sign	iture of U.S. N	Marshal or Deput	y 3≤7
ヘーフルー	Total Mileage Charges Forwardi (including endeavors)	1 1 1 1 1	•	Amount owed to U.S.	í	Amount of Refu	ınd
-			/				
REMARKS:	2.1. 11.	c Po dance	67. (i R	chas -1			
SP412	Release of Le	s fendens	titled in K	ichmond!	County		
REMARKS: 524/12 Clerk	Release of Li 5 office.	s fendens	titled in R	ichmond!	County		